10/726635

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

VX 032576

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			12				-	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED .		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			ノン mir	nus 20=	· 10			X\$ 9=		OR	X\$18=	
INE	EPENDENT C	LAIMS	<u>3</u> mi	nus 3 =	.0			X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column								TOTAL	385	OR	TOTAL	
CLAIMS AS AMENDED - PART II						(Calvera 2)		SMALL		OR	OTHER SMALL I	
		(Column 1)	1	(Colur		(Column 3)	1 1	O IIIAEE	<u>-</u>	1		
AMENDMENT A	7/21/04	REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 12	Minus	* &	06	= ~-		X\$ 9=		OR	X\$18=	
AME	Independent	. 3	Minus	*** (	3	= -		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	-
TOTAL OR TOTAL												
(Column 1) (Column 2) (Column 3)												
	CLAIMS HIGH				(00:0:::::::0)	1 r		ADDI-	1		ADDI-	
ENT B		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
AMENDMENT	T tal	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	] [	X43=		OR	X86=	
_	FIRST PRESE	NTATION OF ML	JLTIPLE DEF	ENDENT	CLAIM	<u> </u>	J	+145=		OR	+290=	
								TOTAL	•	OR	TOTAL	
ADDIT. FEE												
. 7	`	(Column 1)		(Colun		(Column 3)	1 -		100:			455:
AMENDMENT C	•	REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	<b> </b>	X43=			X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145= TOTAL		OR	+290= TOTAL	
**	f the "Highest Nu	mber Previously Pa mber Previously Pa	id For IN THI	S SPACE IS	less that	n 20, enter "20.	۰,	DDIT. FEE	<i>'</i> .	OR	ADDIT. FEE	
		ber Previously Paid					er fou	nd in the app	oropriate box	in col	lumn 1.	